

249802

DIANE L. PETERS  
SENIOR REGULATORY AFFAIRS MANAGER

225 KENNETH DRIVE  
ROCHESTER, NEW YORK 14623

V: 585.255.1425  
M: 585.734.0840  
E: [DIANE.PETERS@LEVEL3.COM](mailto:DIANE.PETERS@LEVEL3.COM)

March 31, 2014

VIA OVERNIGHT DELIVERY

South Carolina Public Service Commission  
Docketing Department  
101 Executive Center Drive; Suite 100  
Columbia, SC 29210

**RE: Authorized Utility Representative Form for Telecommunications Carriers**

Dear Sir or Madam:

Attached please find the 2014 Authorized Utility Representative Form for Telecommunications Carriers for Level 3 Communications, LLC and affiliated legal entities as follows:

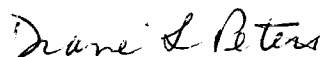
- Broadwing Communications, LLC
- Global Crossing Local Services, Inc.
- Global Crossing Telecommunications, Inc.
- Level 3 Communications, LLC
- TelCove Operations, LLC
- WiTel Communications, LLC

Per instructions, we have filed a copy of the enclosed forms with the Office of Regulatory Staff, Attention Jeanne Gordon.

Please feel free to contact me at (585) 255-1425 or [diane.peters@level3.com](mailto:diane.peters@level3.com) if you have questions or concerns.

Thank you.

Sincerely,



Diane L. Peters

cc: Office of Regulatory Staff, Attn. Jeanne Gordon

# AUTHORIZED UTILITY REPRESENTATIVE FORM FOR TELECOMMUNICATIONS CARRIERS

TYPE:    ☐ IXC            ☒ CLEC            ☐ ILEC            ☐ Wireless

## CERTIFICATED COMPANY INFORMATION

Broadwing Communications, LLC

Company Name

FEIN/SSN

1-877-253-8353

Db/a/fka

Telephone #

1025 Eldorado Blvd

Mailing Address

Broomfield, CO 80021

City, State, Zip Code

1025 Eldorado Blvd

Business Location

Broomfield, CO 80021

Broomfield

City, State, Zip Code

County

## REGISTERED AGENT INFORMATION

Registered Agent: CT Corporation System

Mailing Address: 2 Office Park Court, Suite 103

City, State, Zip Code: Columbia, SC 29223

Pursuant to the Commission's rules and regulations, print or type company contact for the following areas:

- A. Scott Seab  
**General Manager** (Include address if different than above.)  
720-888-3942                      /720-888-5134                      /Scott.Seab@Level3.com  
 Telephone Number                      Facsimile Number                      E-mail Address
- B. Diane L. Peters  
**Customer Relations /Complaints Representative** (Include address if different than above.)  
585-255-1425                      /877-769-9844                      /Diane.Peters@Level3.com  
 Telephone Number                      Facsimile Number                      E-mail Address
- C1. Scott Seab  
**Customer Relations/Complaints Representative for Escalated Complaints** (Include address if different than above.)  
720-888-3942                      /720-888-5134                      /Scott.Seab@Level3.com  
 Telephone Number                      Facsimile Number                      E-mail Address
- C2. 1-877-253-8353  
**Customer Contact (Toll Free Number)**
- D. Engineering Operations  
**Engineering Operations** (Include address if different than above.)  
1-877-453-8353                      /    N/A                      /    N/A  
 Telephone Number                      Facsimile Number                      E-mail Address
- E. Test and Repair  
**Test and Repair** (Include address if different than above.)  
1-877-453-8353                      /    N/A                      /    N/A

Telephone Number                      Facsimile Number                      E-mail Address

F. Emergencies

**Emergencies** (During non-office hours)

1-877-253-8353                      /                      N/A                      /                      N/A

Telephone Number                      Facsimile Number                      E-mail Address

**In addition, please provide the following company contact information to assist in proper routing of correspondence and invoices:**

G. Scott Seab

**Regulatory Officer** (Include address if different than above.)

720-888-3942                      /720-888-5134                      /Scott.Seab@Level3.com

Telephone Number                      Facsimile Number                      E-mail Address

H. N/A

**Dual Party Mailings** (Name)

N/A

Mailing Address

N/A                      /                      N/A                      /                      N/A

Telephone Number                      Facsimile Number                      E-mail Address

I. N/A

**Interim LEC Fund Mailings** (Name)

N/A

Mailing Address

N/A                      /                      N/A                      /                      N/A

Telephone Number                      Facsimile Number                      E-mail Address

J. Jeremy Reese, Sr. Manager, Tax

**Universal Service Fund Mailings** (Name)

1025 Eldorado Blvd. Broomfield, CO 80021

Mailing Address

720-888-2923                      /720-888-5028                      /Jeremy.Reese@Level3.com

Telephone Number                      Facsimile Number                      E-mail Address

K. Jeremy Reese, Sr. Manager, Tax

**Gross Receipts Mailings** (Name)

1025 Eldorado Blvd. Broomfield, CO 80021

Mailing Address

720-888-2923                      /720-888-5028                      /Jeremy.Reese@Level3.com

Telephone Number                      Facsimile Number                      E-mail Address

L. N/A

**Lifeline Mailings** (Name)

N/A

Mailing Address

N/A                      /                      N/A                      /                      N/A

Telephone Number                      Facsimile Number                      E-mail Address

Diane L. Peters

This form was completed by (print name)



Signature

Sr. Regulatory Affairs Manager

Title

3/24/14

Date

RETURN COMPLETED FORM TO:

Public Service Commission of SC  
**Docketing Department**  
Post Office Drawer 11649  
Columbia, South Carolina 29211

Office of Regulatory Staff  
**Attn: Jeanne Gordon**  
1401 Main Street, Suite 900  
Columbia, South Carolina 29201

(Rev. PSC 01/2010)

# AUTHORIZED UTILITY REPRESENTATIVE FORM FOR TELECOMMUNICATIONS CARRIERS

TYPE:    ☐ IXC            ☒ CLEC            ☐ ILEC            ☐ Wireless

## CERTIFICATED COMPANY INFORMATION

Global Crossing Local Services, Inc.	
Company Name	FEIN/SSN
	1-877-253-8353
Dbal/fka	Telephone #
1025 Eldorado Blvd.	
Mailing Address	
Broomfield, CO 80021	
City, State, Zip Code	
Same as Above	
Business Location	
	Broomfield
City, State, Zip Code	County

## REGISTERED AGENT INFORMATION

Registered Agent: CT Corporation System

Mailing Address: 2 Office Park Court, Suite 103

City, State, Zip Code: Columbia, SC 29223

Pursuant to the Commission's rules and regulations, print or type company contact for the following areas:

- A. Scott Seab  
**General Manager** (Include address if different than above.)  

720-888-3942	/ 720-888-5134	/ Scott.Seab@Level3.com
Telephone Number	Facsimile Number	E-mail Address
- B. Diane L. Peters  
**Customer Relations /Complaints Representative** (Include address if different than above.)  

585-255-1425	877-769-9844	Diane.Peters@Level3.com
Telephone Number	Facsimile Number	E-mail Address
- C1. Scott Seab  
**Customer Relations/Complaints Representative for Escalated Complaints** (Include address if different than above.)  

720-888-3942	/ 720-888-5134	/ Scott.Seab@Level3.com
Telephone Number	Facsimile Number	E-mail Address
- C2. 1-877-253-8353  
**Customer Contact (Toll Free Number)**
- D. Engineering Operations  
**Engineering Operations** (Include address if different than above.)  

1-877-453-8353	/ N/A	/ N/A
Telephone Number	Facsimile Number	E-mail Address
- E. Test and Repair  
**Test and Repair** (Include address if different than above.)  

1-877-453-8353	/ N/A	/ N/A
Telephone Number	Facsimile Number	E-mail Address

F. Technician on Duty  
**Emergencies** (During non-office hours)  
1+877-253-8353 / N/A / N/A  
Telephone Number Facsimile Number E-mail Address

**In addition, please provide the following company contact information to assist in proper routing of correspondence and invoices:**

G. Scott Seab  
**Regulatory Officer** (Include address if different than above.)  
720-888-3942 / 720-888-5134 / Scott.Seab@Level3.com  
Telephone Number Facsimile Number E-mail Address

H. N/A  
**Dual Party Mailings** (Name)  
N/A  
Mailing Address  
N/A / N/A / N/A  
Telephone Number Facsimile Number E-mail Address

I. Jeremy Reese, Sr. Manager, Tax  
**Interim LEC Fund Mailings** (Name)  
1025 Eldorado Boulevard, Broomfield, CO 80021  
Mailing Address  
720-888-2923 / 720-888-5028 / Jeremy.Reese@level3.com  
Telephone Number Facsimile Number E-mail Address

J. Jeremy Reese, Sr. Manager, Tax  
**Universal Service Fund Mailings** (Name)  
1025 Eldorado Boulevard, Broomfield, CO 80021  
Mailing Address  
720-888-2923 / 720-888-5028 / Jeremy.Reese@level3.com  
Telephone Number Facsimile Number E-mail Address

K. Jeremy Reese, Sr. Manager, Tax  
**Gross Receipts Mailings** (Name)  
1025 Eldorado Boulevard  
Mailing Address  
720-888-2923 / 720-888-5028 / Jeremy.Reese@level3.com  
Telephone Number Facsimile Number E-mail Address

L. Jeremy Reese, Sr. Manager, Tax  
**Lifeline Mailings** (Name)  
1025 Eldorado Boulevard  
Mailing Address  
720-888-2923 / 720-888-5028 / Jeremy.Reese@level3.com  
Telephone Number Facsimile Number E-mail Address

Diane L. Peters  
This form was completed by (print name) Signature  
Sr. Regulatory Affairs Mgr 3/24/14  
Title Date

RETURN COMPLETED FORM TO:

Public Service Commission of SC  
**Clerk's Office**  
Post Office Drawer 11649  
Columbia, South Carolina 29211

Office of Regulatory Staff  
**Attn: Jeanne Gordon**  
1401 Main Street, Suite 900  
Columbia, South Carolina 29201

(Rev. PSC 11/2010)

# AUTHORIZED UTILITY REPRESENTATIVE FORM FOR TELECOMMUNICATIONS CARRIERS

TYPE:    ☒ IXC        ☐ CLEC        ☐ ILEC        ☐ Wireless

## CERTIFICATED COMPANY INFORMATION

Global Crossing Telecommunications, Inc.	
Company Name	FEIN/SSN
	877-453-8353
Dbal/fka	Telephone #
1025 Eldorado Blvd.	
Mailing Address	
Broomfield, CO 80021	
City, State, Zip Code	
Same as Above	
Business Location	
	Broomfield
City, State, Zip Code	County

## REGISTERED AGENT INFORMATION

Registered Agent: CT Corporation System

Mailing Address: 2 Office Park Court, Suite 103

City, State, Zip Code: Columbia, SC 29223

Pursuant to the Commission's rules and regulations, print or type company contact for the following areas:

- A. Scott Seab  
**General Manager** (Include address if different than above.)  
720-888-3942                      /720-888-5134                      /Scott.Seab@Level3.com  
 Telephone Number                      Facsimile Number                      E-mail Address
- B. Diane L. Peters  
**Customer Relations /Complaints Representative** (Include address if different than above.)  
585-255-1425                      /877-769-9844                      /Diane.Peters@Level3.com  
 Telephone Number                      Facsimile Number                      E-mail Address
- C1. Scott Seab  
**Customer Relations/Complaints Representative for Escalated Complaints** (Include address if different than above.)  
720-888-3942                      /720-888-5134                      /Scott.Seab@Level3.com  
 Telephone Number                      Facsimile Number                      E-mail Address
- C2. 1-877-253-8353  
**Customer Contact (Toll Free Number)**
- D. Engineering Operations  
**Engineering Operations** (Include address if different than above.)  
1-877-453-8353                      /N/A                      /N/A  
 Telephone Number                      Facsimile Number                      E-mail Address
- E. Test and Repair  
**Test and Repair** (Include address if different than above.)  
1-877-453-8353                      /N/A                      /N/A  
 Telephone Number                      Facsimile Number                      E-mail Address

F. Technician on Duty  
**Emergencies** (During non-office hours)  
1-877-253-8353 / N/A / N/A  
Telephone Number Facsimile Number E-mail Address

**In addition, please provide the following company contact information to assist in proper routing of correspondence and invoices:**

G. Scott Seab  
**Regulatory Officer** (Include address if different than above.)  
720-888-3942 / 720-888-5134 / Scott.Seab@Level3.com  
Telephone Number Facsimile Number E-mail Address

H. N/A  
**Dual Party Mailings** (Name)  
N/A  
Mailing Address  
N/A / N/A / N/A  
Telephone Number Facsimile Number E-mail Address

I. Jeremy Reese, Sr. Manager, Tax  
**Interim LEC Fund Mailings** (Name)  
1025 Eldorado Boulevard, Broomfield, CO 80021  
Mailing Address  
720-888-2923 / 720-888-5028 / Jeremy.Reese@level3.com  
Telephone Number Facsimile Number E-mail Address

J. Jeremy Reese, Sr. Manager, Tax  
**Universal Service Fund Mailings** (Name)  
1025 Eldorado Boulevard, Broomfield, CO 80021  
Mailing Address  
720-888-2923 / 720-888-5028 / Jeremy.Reese@level3.com  
Telephone Number Facsimile Number E-mail Address

K. Jeremy Reese, Sr. Manager, Tax  
**Gross Receipts Mailings** (Name)  
1025 Eldorado Boulevard, Broomfield, CO 80021  
Mailing Address  
720-888-2923 / 720-888-5028 / Jeremy.Reese@level3.com  
Telephone Number Facsimile Number E-mail Address

L. Jeremy Reese, Sr. Manager, Tax  
**Lifeline Mailings** (Name)  
1025 Eldorado Boulevard  
Mailing Address  
720-888-2923 / 720-888-5028 / Jeremy.Reese@level3.com  
Telephone Number Facsimile Number E-mail Address

Diane L. Peters  
This form was completed by (print name) Signature  
Sr. Regulatory Affairs Manager Title 3/24/14 Date

RETURN COMPLETED FORM TO:

Public Service Commission of SC  
**Clerk's Office**  
Post Office Drawer 11649  
Columbia, South Carolina 29211

Office of Regulatory Staff  
**Attn: Jeanne Gordon**  
1401 Main Street, Suite 900  
Columbia, South Carolina 29201

(Rev. PSC 11/2010)

# AUTHORIZED UTILITY REPRESENTATIVE FORM FOR TELECOMMUNICATIONS CARRIERS

TYPE:    ☒ IXC            ☒ CLEC            ☐ ILEC            ☐ Wireless

## CERTIFICATED COMPANY INFORMATION

Level 3 Communications, LLC

---

Company Name FEIN/SSN

---

1-877-253-8353

Dbal/fka Telephone #

---

1025 Eldorado Blvd

---

Mailing Address

---

Broomfield, CO 80021

---

City, State, Zip Code

---

1025 Eldorado Blvd

---

Business Location

---

Broomfield, CO 80021 Broomfield

---

City, State, Zip Code County

---

## REGISTERED AGENT INFORMATION

Registered Agent: CT Corporation System

---

Mailing Address: 2 Office Park Court, Suite 103

---

City, State, Zip Code: Columbia, SC 29223

---

Pursuant to the Commission's rules and regulations, print or type company contact for the following areas:

- A. Scott Seab
- General Manager** (Include address if different than above.)
- 
- 720-888-3942                      720-888-5134                      /Scott.Seab@Level3.com
- Telephone Number                      Facsimile Number                      E-mail Address
- 
- B. Diane L. Peters
- Customer Relations /Complaints Representative** (Include address if different than above.)
- 
- 585.255.1425                      /877-769-9844                      /Diane.Peters@Level3.com
- Telephone Number                      Facsimile Number                      E-mail Address
- 
- C1. Scott Seab
- Customer Relations/Complaints Representative for Escalated Complaints** (Include address if different than above.)
- 
- 720-888-3942                      720-888-5134                      /Scott.Seab@Level3.com
- Telephone Number                      Facsimile Number                      E-mail Address
- 
- C2. 1-877-253-8353
- Customer Contact (Toll Free Number)**
- 
- D. Engineering Operations
- Engineering Operations** (Include address if different than above.)
- 
- 1-877-453-8353                      /    N/A                      /    N/A
- Telephone Number                      Facsimile Number                      E-mail Address
- 
- E. Test and Repair
- Test and Repair** (Include address if different than above.)
- 
- 1-877-453-8353                      /    N/A                      /    N/A
-



Telephone Number                      Facsimile Number                      E-mail Address

F. Emergencies  
**Emergencies** (During non-office hours)  
1-877-253-8353                      /                      N/A                      /                      N/A  
Telephone Number                      Facsimile Number                      E-mail Address

**In addition, please provide the following company contact information to assist in proper routing of correspondence and invoices:**

G. Scott Seab  
**Regulatory Officer** (Include address if different than above.)  
720-888-3942                      /720-888-5134                      /Scott.Seab@Level3.com  
Telephone Number                      Facsimile Number                      E-mail Address

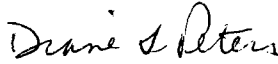
H. N/A  
**Dual Party Mailings** (Name)  
N/A  
Mailing Address  
N/A                      /                      N/A                      /                      N/A  
Telephone Number                      Facsimile Number                      E-mail Address

I. N/A  
**Interim LEC Fund Mailings** (Name)  
N/A  
Mailing Address  
N/A                      /                      N/A                      /                      N/A  
Telephone Number                      Facsimile Number                      E-mail Address

J. Jeremy Reese, Sr. Manager, Tax  
**Universal Service Fund Mailings** (Name)  
1025 Eldorado Boulevard, Broomfield, CO 80021  
Mailing Address  
720-888-2923                      /720-888-5028                      /Jeremy.Reese@Level3.com  
Telephone Number                      Facsimile Number                      E-mail Address

K. Jeremy Reese, Sr. Manager, Tax  
**Gross Receipts Mailings** (Name)  
1025 Eldorado Boulevard, Broomfield, CO 80021  
Mailing Address  
720-888-2923                      /720-888-5028                      /Jeremy.Reese@Level3.com  
Telephone Number                      Facsimile Number                      E-mail Address

L. N/A  
**Lifeline Mailings** (Name)  
N/A  
Mailing Address  
N/A                      /                      N/A                      /                      N/A  
Telephone Number                      Facsimile Number                      E-mail Address

Diane L. Peters                        
This form was completed by (print name)                      Signature

Sr. Regulatory Affairs Manager                      3/24/14  
Title                      Date

RETURN COMPLETED FORM TO:

Public Service Commission of SC  
**Docketing Department**  
Post Office Drawer 11649  
Columbia, South Carolina 29211

Office of Regulatory Staff  
**Attn: Jeanne Gordon**  
1401 Main Street, Suite 900  
Columbia, South Carolina 29201

(Rev. PSC 01/2010)



F. Emergencies  
**Emergencies** (During non-office hours)  
1-877-253-8353 / N/A / N/A  
Telephone Number Facsimile Number E-mail Address

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G. Scott Seab  
**Regulatory Officer** (Include address if different than above.)  
720-888-3942 / 720-888-5134 / Scott.Seab@Level3.com  
Telephone Number Facsimile Number E-mail Address

H. N/A  
**Dual Party Mailings** (Name)  
N/A  
Mailing Address  
N/A / N/A / N/A  
Telephone Number Facsimile Number E-mail Address

I. N/A  
**Interim LEC Fund Mailings** (Name)  
N/A  
Mailing Address  
N/A / N/A / N/A  
Telephone Number Facsimile Number E-mail Address

J. Jeremy Reese, Sr. Manager Tax  
**Universal Service Fund Mailings** (Name)  
1025 Eldorado Blvd. Broomfield, CO 80021  
Mailing Address  
720-888-2923 / 720-888-5028 / Jeremy.Reese@Level3.com  
Telephone Number Facsimile Number E-mail Address

K. Jeremy Reese, Sr. Manager, Tax  
**Gross Receipts Mailings** (Name)  
1025 Eldorado Blvd. Broomfield, CO 80021  
Mailing Address  
720-888-2923 / 720-888-5028 / Jeremy.Reese@Level3.com  
Telephone Number Facsimile Number E-mail Address

L. N/A  
**Lifeline Mailings** (Name)  
N/A  
Mailing Address  
N/A / N/A / N/A  
Telephone Number Facsimile Number E-mail Address

Diane L. Peters  
This form was completed by (print name)

*Diane L. Peters*  
Signature

Sr. Regulatory Affairs Manager  
Title

3/24/14  
Date

RETURN COMPLETED FORM TO:

Public Service Commission of SC  
**Docketing Department**  
Post Office Drawer 11649  
Columbia, South Carolina 29211

Office of Regulatory Staff  
**Attn: Jeanne Gordon**  
1401 Main Street, Suite 900  
Columbia, South Carolina 29201

(Rev. PSC 01/2010)

# AUTHORIZED UTILITY REPRESENTATIVE FORM FOR TELECOMMUNICATIONS CARRIERS

TYPE:    ☐ IXC            ☒ CLEC            ☐ ILEC            ☐ Wireless

## CERTIFICATED COMPANY INFORMATION

WilTel Communications, LLC	
Company Name	FEIN/SSN
	1-877-253-8353
Dbal/fka	Telephone #
1025 Eldorado Blvd	
Mailing Address	
Broomfield, CO 80021	
City, State, Zip Code	
1025 Eldorado Blvd	
Business Location	
Broomfield, CO 80021	Broomfield
City, State, Zip Code	County

## REGISTERED AGENT INFORMATION

Registered Agent: CT Corporation System
Mailing Address: 2 Office Park Court, Suite 103
City, State, Zip Code: Columbia, SC 29223

Pursuant to the Commission's rules and regulations, print or type company contact for the following areas:

- |     |   |
|-----|---|
| A.  | <div style="border-bottom: 1px solid black;">Scott Seab</div> <div style="border-bottom: 1px solid black;"><b>General Manager</b> (Include address if different than above.)</div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border-bottom: 1px solid black; width: 30%;">720-888-3942</div> <div style="border-bottom: 1px solid black; width: 30%;">/720-888-5134</div> <div style="border-bottom: 1px solid black; width: 30%;">/Scott.Seab@Level3.com</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div>Telephone Number</div> <div>Facsimile Number</div> <div>E-mail Address</div> </div>   |
| B.  | <div style="border-bottom: 1px solid black;">Diane Peters</div> <div style="border-bottom: 1px solid black;"><b>Customer Relations /Complaints Representative</b> (Include address if different than above.)</div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border-bottom: 1px solid black; width: 30%;">585-255-1425</div> <div style="border-bottom: 1px solid black; width: 30%;">/877-769-9844</div> <div style="border-bottom: 1px solid black; width: 30%;">/Diane.Peters@Level3.com</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div>Telephone Number</div> <div>Facsimile Number</div> <div>E-mail Address</div> </div>                     |
| C1. | <div style="border-bottom: 1px solid black;">Scott Seab</div> <div style="border-bottom: 1px solid black;"><b>Customer Relations/Complaints Representative for Escalated Complaints</b> (Include address if different than above.)</div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border-bottom: 1px solid black; width: 30%;">720-888-3942</div> <div style="border-bottom: 1px solid black; width: 30%;">/720-888-5134</div> <div style="border-bottom: 1px solid black; width: 30%;">/Scott.Seab@Level3.com</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div>Telephone Number</div> <div>Facsimile Number</div> <div>E-mail Address</div> </div> |
| C2. | <div style="border-bottom: 1px solid black;">1-877-253-8353</div> <div style="border-bottom: 1px solid black;"><b>Customer Contact (Toll Free Number)</b></div>   |
| D.  | <div style="border-bottom: 1px solid black;">Engineering Operations</div> <div style="border-bottom: 1px solid black;"><b>Engineering Operations</b> (Include address if different than above.)</div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border-bottom: 1px solid black; width: 30%;">1-877-453-8353</div> <div style="border-bottom: 1px solid black; width: 30%;">/ N/A</div> <div style="border-bottom: 1px solid black; width: 30%;">/ N/A</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div>Telephone Number</div> <div>Facsimile Number</div> <div>E-mail Address</div> </div>   |
| E.  | <div style="border-bottom: 1px solid black;">Test and Repair</div> <div style="border-bottom: 1px solid black;"><b>Test and Repair</b> (Include address if different than above.)</div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border-bottom: 1px solid black; width: 30%;">1-877-453-8353</div> <div style="border-bottom: 1px solid black; width: 30%;">/ N/A</div> <div style="border-bottom: 1px solid black; width: 30%;">/ N/A</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div>Telephone Number</div> <div>Facsimile Number</div> <div>E-mail Address</div> </div>   |

F. Emergencies  
**Emergencies** (During non-office hours)  
1-877-253-8353 / N/A / N/A  
Telephone Number Facsimile Number E-mail Address

**In addition, please provide the following company contact information to assist in proper routing of correspondence and invoices:**

G. Scott Seab  
**Regulatory Officer** (Include address if different than above.)  
720-888-3942 / 720-888-5134 / Scott.Seab@Level3.com  
Telephone Number Facsimile Number E-mail Address

H. N/A  
**Dual Party Mailings** (Name)  
N/A  
Mailing Address  
N/A / N/A / N/A  
Telephone Number Facsimile Number E-mail Address

I. N/A  
**Interim LEC Fund Mailings** (Name)  
N/A  
Mailing Address  
N/A / N/A / N/A  
Telephone Number Facsimile Number E-mail Address

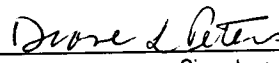
J. Jeremy Reese, Sr. Manager, Tax  
**Universal Service Fund Mailings** (Name)  
1025 Eldorado Blvd. Broomfield, CO 80021  
Mailing Address  
720-888-2923 / 720-888-5028 / Jeremy.Reese@Level3.com  
Telephone Number Facsimile Number E-mail Address

K. Jeremy Reese, Sr. Manager, Tax  
**Gross Receipts Mailings** (Name)  
1025 Eldorado Blvd. Broomfield, CO 80021  
Mailing Address  
720-888-2923 / 720-888-5028 / Jeremy.Reese@Level3.com  
Telephone Number Facsimile Number E-mail Address

L. N/A  
**Lifeline Mailings** (Name)  
N/A  
Mailing Address  
N/A / N/A / N/A  
Telephone Number Facsimile Number E-mail Address

Diane L. Peters

This form was completed by (print name)

  
Signature

Sr. Regulatory Affairs Manager

Title

3/24/14

Date

RETURN COMPLETED FORM TO:

Public Service Commission of SC  
**Docketing Department**  
Post Office Drawer 11649  
Columbia, South Carolina 29211

Office of Regulatory Staff  
**Attn: Jeanne Gordon**  
1401 Main Street, Suite 900  
Columbia, South Carolina 29201

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